CHANGE OF CORRESPONDENCE ADDRESS *Application* Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.	Application Number	10/535,380
	Filing Date	5/19/2005
	First Named Inventor	Serge Fdida
	Art Unit	2154
	Examiner Name	Turner, Ashley D
	Attorney Docket Number	35201-003US1

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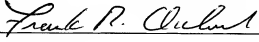
I am the :

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ Attorney or agent of record. Registration Number 35,306 .

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____ .

Signature	*Frank R. Occhiuti* (signature)
Typed or Printed Name	Frank R. Occhiuti
Date	February 28, 2008	Telephone	617-500-2500

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.